

Strategy # 9 –Provide a comprehensive family support model that incorporates care coordination and to provide families with the necessary resources and services to promote the health and development of their young children.

The Southeast Maricopa Regional Council is looking to develop a comprehensive family support model that will serve families throughout pregnancy until their child enters kindergarten, usually age 5. The desired program will enhance child development and school achievement through parent education accessible to all families within the region with children ages 0-5.

The Southeast Maricopa Regional Council Partnership recognizes that all families benefit from support. Within Mesa, Gilbert and Queen Creek families come in all configurations from all socio-economic levels, and from rural, urban and suburban communities. The population of children and families in this region differs somewhat from the rest of the state and the nation. The region has grown more rapidly and is less ethnically diverse than the state. This growth has been fueled by proximity to Phoenix and availability of affordable housing.

Census data reveals that currently there are 74,802 children ages 0-5 are estimated to live in the Southeast Maricopa region with a reported 3 to 8 percent poverty rate for households. The region is comprised of a large number of families and approximately 28,183 children (38 percent) in the region participate in regulated care. Clearly, there is a significant need to support families with young children. Education begins at home as parents are their children's first and most influential teachers. Parents who are involved in their children's early care and education have children who are better prepared for school.

Therefore, a desired family support model, based on voluntary participation, must be adaptable to fit various family and community needs. The ideal family support strategy will include the following key components; home visitation, parent education, developmental screenings and public awareness of resources. The Regional Council will commit almost 60% of its funding allocation to this strategy as the Regional Council recognizes the tremendous need that exists for family support services in the communities of Southeast Maricopa. As outlined in this plan, the funding allocated will target about 4% of the population for home visiting services. Therefore the Regional Council understands the importance of this family support strategy building on existing parent support programs within the community and developing mechanisms to coordinate with Strategies 1&2 (health insurance outreach and health e-app internet applications for families), Strategy 3 (access to preventative oral health care), Strategy 4 (health education and screening activities for children ages 0-5), Strategies 5&7 (T.E.A.C.H. and Quality First), as well as, Strategy 8, (coaching and consultation model) so that a seamless flow of services for families with children ages 0-5 in Southeast Maricopa County exists.

Home Visitation

The major service delivery component is home visiting which will be structured to address the full range of child and family needs. Traditionally, home visitation programs offer an effective mechanism for parental education, and linkage with public and private community services. During visits, a parent educator shares age appropriate child development information with parents who wish for information, helping them learn to observe their own child, address their parenting concerns and engaging the family in activities that provide meaningful child-parent interaction. At minimum home visiting staff will conduct monthly visits, typically in the home, using evidence based curriculum plans that are appropriate for child's development and age. Based on parental requests, parent educators:

- build rapport with the family
- discuss child development and parenting practices
- model, consult, and coach on parenting practices
- engage in parent-child activities, including book reading, to foster observation of the child's behavior and parent-child interaction
- summarize new information and follow progress from previous visits to reinforce parent knowledge of parental strengths, newly achieved child developmental milestones, and activities to support further developmental progress

Programs will have a mechanism in place to provide families information and freely support in each of the following areas:

- All domains of child development (physical, cognitive, social, emotional, language, sensory)
- Appropriate child-adult interactions (i.e. engage in responsive, trusting, nurturing relationships, develop an understanding of self and others, physical touch, positive discipline, early reading experiences and verbal and visual communications)
- Natural supports for families/peer support
- Language and early literacy development
- Health (i.e. nutrition; obesity; breastfeeding; physical activity; immunizations; oral health; insurance enrollment; participation in consistent medical/dental homes; participation in prenatal care; safety; developmental health, vision and hearing screening)
- Service Coordination with other community resources to ensure that efforts are not duplicated and to ensure that families receive comprehensive services as needed.

These programs will:

1. Assess family status using curriculum-based or standardized tools to identify strengths and needs.
2. Conduct regular developmental screenings using a standardized tool. Periodic developmental, health, vision, and hearing screening provides for early identification of developmental delays and health, vision, and hearing problems. For those situations where a concern arises with a child's development, home visiting staff will coordinate with whatever agency is identified to support Strategy 4/ Screening to afford the child and the family a more comprehensive

screening and referral services.

3. Develop and implement a family service plan based upon assessment findings. Plan should include outcomes and activities for the family, frequency and duration of home visits and a plan for transition from home visitation.
4. Provide service coordination to community-based supports, services or resources. Collaborate with any/ all working with the family.
5. Identify outreach, engagement and retention practices for participants/ families.

Community Based Parent Education

In creating a comprehensive model of family support the families residing in this diverse region, the Southeast Maricopa Regional Partnership Council recognizes that home visiting programs offer an effective mechanism of support to families who may have insufficient knowledge of parenting skills or an inadequate support system of friends, extended family, or professionals to available to them. Understanding that one size does not fit all, the Southeast Maricopa Regional Partnership Council seeks to extend family support services, to those families who desire to participate, within the region by advancing programs that provide education and support to families through community based parent education programs.

Community-based education programs work to enable families to build on their own strengths and capacities to promote the healthy development of children. Successful parent education programs help parents acquire and internalize parenting and problem-solving skills necessary to build a healthy family. Effective parenting education develops nurturing and attachment, knowledge of parenting and of child development, parental resilience, and social connections and supports for parents. Research suggests that improving fundamental parenting practices reduces the likelihood of problem behaviors in children. It has been shown that parent-child relationships can be enhanced through parent training and family strengthening programs.

While these programs come in different forms, they have a common goal of increasing the level of family functioning and promoting healthy child development. Programs are embedded in their communities and contribute to the community building process. Parents should be able to access educational information in their community on a variety of child development topics. Information about where and when parenting education programs are available needs to be easily accessible by all interested persons.

All community based education programs to be funded will need to be evidence based practices or promising practices. Additionally, all funded proposals must clearly articulate how they will coordinate with other grantees and community resources to ensure that efforts are not duplicated and to ensure that families receive comprehensive services.

Key Measures:

- Percentage of families with children birth through age five who report they are satisfied with the accessibility of information and resources on child development and health
- Percentage of families with children birth through age five who report they are competent and confident about their ability to support their child's safety, health, and well-being
- Percentage of families with children birth to five who report reading to their children daily
- Ratio of children referred and found eligible for early intervention

Target Population (Description of the population to reach):

Families with children ages 0-5 throughout the region.

Proposed Service Numbers	SFY2010 July 1, 2009 – June 30, 2010	SFY2011 July 1, 2010 – June 30, 2011	SFY2012 July 1, 2011 - June 30, 2012
	1,386 Families	1,386 Families	1,386 Families

Performance Measures SFY 2010-2012

1. # and % of families receiving home visiting services/proposed service #
2. # of children screened for developmental delays/Actual service # Number and percent of families receiving an initial home visit
3. # of first time mothers served by home visiting program
4. % of families that reported satisfaction with provided family home visiting support/strategic target
5. # of families receiving a child development evaluation/consult/strategic target
6. % of families showing increases in parenting knowledge and skill after receiving family support
7. % of children served by the program that have medical and dental homes/Actual # children in region

How is this strategy building on the service network that currently exists:

- Currently Healthy Families, Maricopa County Newborn Intensive Care Program, Early Head Start and Preschool Head Start provide home visitation programs that service families in this region
- Opportunities exist to build, expand and coordinate these existing services into a comprehensive program serving children before they enter school

What are the opportunities for collaboration and alignment:

- There are opportunities to build partnerships with regional hospitals establishing connections

between existing community resources and programs to address the issue

- Potential to build on the communities' center based programs and existing home visitation programs to provide a comprehensive family support program designed to prepare children to succeed in school and life
- Potential opportunity to receive matching funding from a local foundation
- Potential to partner with local hospitals, clinics and other community partners to expand this program

SFY2010 Expenditure Plan for Proposed Strategy

Population-based Allocation for proposed strategy

\$4,660,090.28

Budget Justification:

Describe how the allocation for the strategy was determined including characteristics unique to the region. (Note: Regional Councils may want to consider evaluation and community outreach and awareness expenses. If these are included provide a breakdown of amounts in this section.)

Home Visitation

Recommended budgeting is between \$1,000 and \$5,000 per family depending on level of services required. The Southeast Maricopa Regional Partnership Council will select a fair market median range allocation of \$3,000 per family.

$\$4,160,090 / \$3,000 = 1,386$ families served through Home Visitation.

Community Based Parent Education

Southeast Maricopa Regional Partnership Council supports programs that provide education and support to families through community based parent education programs. An allocation of \$500,000.28 will be designated to support evidence based community education programs.

Total Family Support Expenditure = \$4,660,090.28